

2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000067269

FILED
Mar 01, 2012
Secretary of State

Entity Name: MEDICAL BILLING NETWORK, LLC

Current Principal Place of Business:

460 KETTLE HARBOR DRIVE
PLACIDA, FL 33946

New Principal Place of Business:

13534 GERONIMO LANE
PORT CHARLOTTE, FL 33946

Current Mailing Address:

PO BOX 5072
ENGLEWOOD, FL 34224

New Mailing Address:

FEI Number: 90-0602049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOMMERS, ADRIENNE
460 KETTLE HARBOR DR
PLACIDA, FL 33946 US

Name and Address of New Registered Agent:

SOMMERS, ADRIENNE
13534 GERONIMO LANE
PORT CHARLOTTE, FL 33946 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ADRIENNE SOMMERS

03/01/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SOMMERS, ADRIENNE
Address: 13534 GERONIMO LANE
City-St-Zip: PORT CHARLOTTE, FL 33946

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ADRIENNE SOMMERS

PRES

03/01/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date